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ABSTRACT

This report discusses the activities and outcomes of a study that investigated the effects of social service reform, school restructuring, and special education reform for children and youth with emotional and behavioral disabilities. The study involved 116 caregivers of students (ages 8-14) with emotional or behavioral disabilities served in a special education program. Successful school-based models were identified through a multi-method site selection process, consisting of a national call for nominations, an examination of responses to two surveys, and a site visit. These methods resulted in 10 schools participating in the study. Characteristics of successful school programs were: (1) governance referred to the degree of decentralization of authority from the district to the school building level; (2) curriculum and instructional reform was reflected by innovative techniques and models to improve the instruction of children in both regular and special education classrooms, including multi-age grouping, instructional teams, and consultative-collaborative models of special education; (3) standardized tests were used in addition to criterion-referenced tests to measure outcomes; (4) high levels of parent involvement; and (5) use of pro-social discipline. After 12 months of participation, students showed an increase in achievement and a decrease in problem behavior and functional impairment. (CR)

School and Community Study: Exemplary School Models and Student Outcomes Over Time

Introduction

The School and Community Study (SACS) is designed to study the effects of social service reform, school restructuring, and special education reform for children and youth with emotional and behavioral disabilities. Specifically, this study identifies successful school-based models, explicates the reforms used, and demonstrates that there are efforts which contribute to improved outcomes for children and youth.

Method

Voluntary consent to participate was obtained from 116 of 145 caregivers of eligible students formally identified as having an emotional or behavioral disability by their school and served in a special education program. These students were followed longitudinally for two years. This summary discusses findings for participants at baseline age and 12-month follow-up.

On average, the sample was 11.6 years of age ($SD = 3.1$), mostly male (81%), Caucasian (79%), and likely to receive free or reduced price school meals (66%). Participants and non-participants did not differ significantly with regard to gender $\chi^2(1, n = 145) = 1.05, p > .05$; race $\chi^2(1, n = 145) = .48, p > .05$; age $t(143) = 1.81, p = .07$; or cost of school meals $\chi^2(1, n = 145) = .50, p > .05$.

Staff used a variety of data collection methods including surveys, semi-structured interviews, and reviews of student records. The standardized instruments used in the study include the Wide Range Achievement Test III (WRAT III: Wilkinson, 1993), Slosson Intelligence Test-Revised (SIT-R: Slosson, Nicholson, & Hibpsman, 1996), Behavioral and Emotional Rating Scale (BERS: Epstein & Sharma, 1997), Child Behavior Checklist (CBCL: Achenbach, 1991), Child and Adolescent Functional Assessment Scale (CAFAS: Hodges, 1990), Child and Adolescent Services Assessment (CASA: Ascher, Farmer, & Burns, 1996), and Client Satisfaction Questionnaire (CSQ: Attkisson & Zwick, 1982).

Successful school-based models were identified through a multi method site selection process, consisting of a national call for nominations, an examination of responses to two surveys, and a site visit. Fourteen of 216 nominated schools were invited to participate, with 10 schools participating in the study. Data were collected from individuals at the state level, local community leaders, members of local interagency committees, school personnel, parents, and the children themselves.

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Results

The study sample included two schools each from Maryland, Georgia, Vermont, and Kentucky and one school each from Iowa and Wisconsin. The schools were five elementary schools, two schools serving children in grades K-8, one middle school, and two high schools.

Within the sample, six operating structures began to emerge: 1) Governance referred to the degree of decentralization of authority from the district to the school building level (e.g., whether the principal, faculty, and parents shared decision-making); 2) Curriculum and Instructional Reform was reflected by innovative techniques and models to improve the instruction of children in both regular and special education classrooms, including multi-age grouping, instructional teams, and consultative-collaborative models of special education; 3) Accountability was demonstrated by commitment to the evaluation of outcomes for all students. In measuring outcomes, standardized tests were used in addition to criterion-referenced tests; 4) Parent involvement was indicated by high levels of parent involvement, including parents of children who have emotional and behavioral disabilities; 5) "Includedness" occurred when school staff shared the belief that students who have emotional and behavioral disabilities belong in the community school and their education is the responsibility of all teachers, and; 6) Pro-Social Discipline was indicated by policy and procedures in support of such approaches as conflict resolution, peer counseling, and a process for handling discipline for all students in an individual manner, including those who have emotional behavioral disabilities.

The measurement of these six areas in the participating schools was achieved with a very high degree of reliability. Ratings from five staff independent of the study resulted in an intra-class reliability coefficient of .87.

Student Performance at Baseline

The average IQ score was 91 ($N = 116$), and the average standard score was 87 for reading achievement and 85 for math achievement. In academic functioning, 47% scored in the below average range, with 57% below average in reading, and 54% below average in math. For emotional functioning, the average CBCL Total Problem T-Score was 67.00, with 10% of the children scoring in the borderline range

and 70% scoring in the clinical range. Participants scored an average Strength Quotient of 113.7 on the BERS, indicating above average strengths. CAFAS scores indicated 80% of the students were in the severe or moderate range in 4 of the 8 domains: 1) Behavior Toward Others, 2) Moods/Emotions, 3) Role Performance at School, and 4) Home.

On average, students spent 24% of their day in an academic general education setting and 21% in a nonacademic general education setting. Group counseling (42%) and case management (35%) were the services delivered most frequently during the school day. Ninety-five percent had received help from professionals (e.g., school personnel) during the past five months, and 48% had received outpatient treatment. Parents reported that they were highly satisfied with both educational and related services and were highly involved in school functions and the special education process.

Twelve-Month Outcomes

Data were collected from 114 of the 116 original study participants. Repeated measure ANOVAs indicated: 1) a statistically significant increase in reading achievement and a slight (though not statistically significant) increase in math achievement; 2) a statistically significant decrease for Externalizing, Internalizing, and Total Problem scales on the CBCL; and 3) a statistically significant decrease on the CAFAS score representing overall level of functional impairment (see Table 1).

Discussion

The majority of students in the study were below grade level in both reading and math achievement and had substantial emotional and behavioral problems. Analyses of change between baseline and 12 months revealed an increase in achievement and a decrease in problem behaviors and functional impairment. These findings suggest that schools can successfully improve outcomes for children in spite of significant academic and emotional problems.

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Table 1
Comparison of Mean Achievement, CBCL, and CAFAS Scores
Between Entry into the Study and 12 Month Follow-up Point

Variable	Entry into Study		12 Month Follow-up		t	p	
	<u>M</u>	<u>SD</u>	<u>M</u>	<u>SD</u>			
Wide Range Achievement Test-III							
Math	86.3	17.5	87.3	13.3	.50	.615	
Reading	86.2	17.5	89.0	18.9	2.77	.007	
CBCL ^d							
Internalizing		62.6	11.4	60.5	12.1	2.26	.026
Externalizing		65.8	10.9	63.6	11.0	3.00	.003
Total		66.8	10.3	64.5	11.0	2.82	.006
CAFAS ^e	110.9	48.5	97.5	49.2	3.19	.002	

^aStandard Scores

^bn = 109

^cn = 110

^dn = 110 Child Behavior Checklist; t-scores, M = 50, SD = 10. Higher scores indicate higher levels of behavior problems.

^en = 109 The Child and Adolescent Functional Assessment Scale; scores are based a summated total of 120. Higher scores indicate higher levels of functional impairment